	PATENT A	NPPLICATIO Effect	N FEE DE ive Janua	RD			In	CCC 10	(2						
			SMALL ENTITY TYPE			10666/43 OTHER THAN OR SMALL ENTITY									
TOTAL CLAIMS			(Column 1)		(Column 2)			RATE FEE					EE		
FOR			NUMBER FILED		NUMBER EXTRA		Ŀ	ASIC FE	 			BASIC FEE 750.00			
							F		1	Un					
TOTAL CHARGEABLE CLAIMS			3 _ minus 20=		.0		L	X\$ 9=		OR	X\$18=		<u>\</u>		
INDEPENDENT CLAIMS MULTIPLE DEPENDENT CLAIM P			/_ minus3=		<i>O</i>		L	X42=		OR	X84=				
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					+140=		OR	+280=				
* If the difference in column 1 is less than zero, enter *0" in column 2								TOTAL	1	OR	TOTAL	3	0.0	3	
CLAIMS AS AMENDED - PART II										•	OTHER	-			
15		•	SMALL	ENTITY	OR	SMALL									
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID F		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIC	DDI- NAL EE		
2	Total	.3	Minus	- 2	0	·B		X\$ 9=		OR	X\$18=		1		
ME	Independent	•	Minus	***	3	-6		X42=		OR	X84=		П		
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA							+140=			+280=		\Box		
									<u> </u>	OR	TOTAL	<u> </u>			
5/27/65								ADDIT. FEEOH ADDIT. FEE							
Ë		(Column 1) CLAIMS		(Colur HiGH		(Column 3)	_		ADDI-	1		_ A	DDI-		
MENDMENT B		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F		DUSLY EXTRA		RATE	TIONAL FEE		RATE	TIC	NAL EE		
	Total	• 8	Minus	** Q	_0	- Ø		X\$ 9=		OR	X\$18=				
AME	Independent	• 4	Minus *** 3			- 1		X42=		OR	X84=	X	Des		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=			+280=				
							L	-TOTAL	ļ	OR	TOTAL	L			
ADDIT, FEE															
_		(Column 1)	1	(Colur		(Column 3)						_			
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TK	DDI- DNAL EE		
Š	Total	*	Minus	44		5	lГ	X\$ 9=		OR	X\$18=				
	Independent	•	Minus	989		-	╽┞	X42=		OR	X84=	T			
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								 			-		1	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR OR	+280=	 			
"If the British Country It is less that the entry in country 2. write 0 in country 3. TOTAL "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ACCIT. FEE ""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												_		1	
	The "Highest Nun	nber Previously Pa	id For (Total o	r Independ	ent) is the	highest number	er fourt	in the a	ppropriate bo	x in co	okumn 1.				
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Application or Docket Number